

'It is not enough that we do our best, sometimes we must do what is required'

Winston Churchill

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UPDATES

Consumer Focused Care

A few months ago, the Board of Management spent time working out what their strategic priorities are for the year. Consumer Focused Care was one of their big priorities and they are keen to support us all to provide this for BHS patients.

We recently interviewed >100 patients across all sectors of BHS including a number of our consumer reference groups and the Community Advisory Group to have a look at these principles to work out what were the priorities for BHS patients.

These Principles of Person Centred Care are some key themes we can use to examine a range of feedback from patients and clients to see where we can improve the experience here at BHS.

Have a look at them and think about what you would want yourself if you were a patient, and also about how you would assess the care provided to patients in your unit today.

You'll see them being used in the new quarterly Consumer Experience Report the Consumer Liaison and Experience team in GARM are producing using data from patient surveys, Patient Experience Trackers (PETS), compliments and complaints and patient stories.

Principles of Person Centred Care at BHS

Partners in care with good information and explanations provided

The right treatment, delivered safely

Access to services and treatment

Coordinated and continuous care

Health information that supports care

Friendly staff who listen and provide support

Respectful, individualised care

A physical environment that promotes healing and privacy

Families and friends are encouraged to participate

Nutritional requirements are considered

Mock Survey Update

Put it in the Diary...

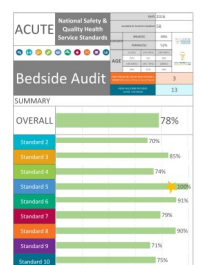
Mock Survey has been updated to 11th/12th and 13th October 2016

(2nd week after school Holidays)

BEDSIDE AUDIT REPORTS 2016

Apologies for delay in reports, but it will be worth the wait. A lot of work has been put into a NEW simple design making the reports easier to use and read.

Reports to be sent out by the end of the week, details on completion of Action Plans will be included in your email.



STANDARD 4 AUDITS UPDATE - MAY 2016

DD Audit — All Audits collected and received have now been entered, results should be distributed within the next month.



Focus month for June is Standard 8 — See over page for details



Preventing & Managing Pressure Injuries

PREVENTION

Some pressure injuries have been found recently that were quite old (weeks to months, not acquired at BHS), but staff on the floor had missed them.

Please remember to complete the BRADEN score pressure Injury Risk Assessment screening tool:

- Within 8hrs of admission
- With any change in condition in condition of skin, patient deterioration or a decrease in mobility
- At the time of transfer or discharge

HAVE YOU COMPELTED A BRADEN RISK ASSEMENT ?

Within
8hrs
of admission

With any
CHANGE
of skin in condition of skin or pt. deterioration / decrease in mobility

At the time of
TRANSFER OR DISCHARGE

Any queries please contact Wound Clinic or your unit area Wound Champion

Posters available in the QuIC s:/ drive under Standard 8/Resources

PIPPS AUDIT JUNE 2016

8th June 2016

AM: PSH – RACS (60)
WBM – RACS (45)
HH – RACS (60)

9th June 2016

AM: JLL – RACS (60)
JTC – RACS (45)
PM: Gandarra (10)
JG – GEM Ward (30)

15th June 2016

AM: BCL – RACS (30)
TP – RACS (30)
AM – PM: 2STH – Pediatrics (13)
5NTH – Midwifery (20)
SCN(12)
ICU / CCU (15)

16th June 2016

AM: GC – RACS (60)
EV – RACS (45)
PM: Rehab (30)

22nd June 2016

AM: 2NTH – Orthopedics (28)
3STH – Surgical (25)
3NTH – Surgical (25)
4STH – Medical (25)
4NTH – Medical (25)
ESU – Extended Stay Unit (6)

24th June 2016

AM: Psychiatric Services – Steele Haughton (Residential & Acute)

*Times to be organised and confirmed, AM start generally 7am.

A Comprehensive SKIN INSPECTION is to be completed ON ADMISSION, at EACH SHIFT for ALL Acute, Sub Acute patients and DAILY for ALL Aged Care Residents (CPG 0198 Skin Check)

KEY MESSAGES

- Pressure Injuries are a major risk at BHS
- All patients need to have skin integrity assessed and maintained
- We need to monitor and take action to reduce harm from pressure injuries
- Factors associated with increased risk of pressure include:
 - INTENSITY of the pressure
 - DURATION of the pressure
 - TISSUE TOLERANCE to pressure
 - SHEAR & FRICTION

PRESSURE INJURY PREVENTION SKIN CHECK

LOOK

- LOOK for non-blanching REDDENED or BROKEN areas of skin
- Pay particular ATTENTION to areas over bony prominences and under medical devices

On the side

LISTEN

ASK the patient if they have any areas of skin that are PAINFUL or BURNING

On the back

FEEL

FEEL skin for changes in:

- Temperature – HOT/COLD
- Texture – BOGGY/FIRM

IF YOU FIND A PRESSURE INJURY

- Offload IMMEDIATELY
- Document on the Patient Management Plan (MR 410.23) or Care Care Plan
- Complete VHIMS
- Commence Pressure Injury Prevention & Management Plan (MR 202.5 or Care)

MANAGEMENT

HIGH RISK/VERY HIGH RISK
MUST HAVE a Pressure Injury Prevention & Management Plan (MR 202.5)

MILD or MODERATE RISK
SHOULD HAVE simple preventative measures implemented (CPP Skin Care 2.11)

REPORTING

ALL Pressure Injuries must be reported on VHIMS Riskman, including:

- If injury was present on admission
- Staged in accordance with pressure injury classification system
- Fully documented, including a wound care chart
- Managed using evidence based best practice wound care (Wound Care CPG)
- Assessed as avoidable or unavoidable based on set criteria

EQUIPMENT

Equipment is available at BHS to assist with offloading pressure, from Heel wedges to Alternating Pressure Mattresses (APAMS).

Equipment along with regular body positioning and comprehensive skin checks are critical to decrease risk and manage current pressure related injuries.

BHS staff must make sure that APAMS are working correctly and functioning at their potential at all times.

IMPORTANT DATES — PDP SESSIONS

See PDP Calendar for details — <http://bhsnet/node/5675>

COMMUNICATE

- Information to patients and relatives about pressure injury prevention.
- Use the Standard 8 High Risk Patient Alert.

